FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000083656 (3)

KHASON MANAGEMENT SERVICES, INC.

FILED Mar 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address			I CONTINON ATO TOTAL CONTA BOOKS OBVILL BOOKS OBJECT IN THE	, v iabi bilib bija ibo)	
2531 N.W. 53RD TERRACE GAINESVILLE FL 49324 2531 N.W. 53RD TERRACE GAINESVILLE FL 49324		:		. DO NOT WRITE IN THIS SPAC	E
				3. Date Incorporated or Qualified 09/26/1997	
2. Principal Place of Business 21	Place of Business 2a. Mailing Address 26			4. FEI Number 159-347/268	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.				8.75 Additional
22	27	· · · · · · · · · · · · · · · · · · ·			Fee Required
City & State	City & State	├ ¬ '			5.00 May Be Added to Fees
Zip Country	Zip 2/ 2/2	Country		8. This corporation owes or has paid the current year intangible	
24 32 60 6 25	29 <u>ク</u> メ <i>(40)(</i> : of Current Registered Agent			Personal Property Tax due June 30. Yes 10, Name and Address of New Registered Agent	
C T CORPORATION SYSTEM			1 Name	10, Name and Address of New Registered Agen	<u> </u>
1200 SOUTH PINE ISLAND ROAD			2 Street Add	(2 O 2 O 1)	
PLANTATION FL 33324		ľ	Z Street Add	ress (P.O. Box Number is Not Acceptable)	
		8	3		
		l a	4 City	p⇒s 85	Zip Code
11 Pursuant to the provisions of Sections	607 0502 and 607 1508 Elorida Statutos	the abo	wa pamed corr	FL o	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
	ERS AND DIRECTORS	13.	gent agnatura requi	ADDITIONS/CHANGES TO OFFICERS AND DIRE	ECTORS IN 12
TITLE - PRest. SecreTA	DELETE	1.1 TITLE			hange Addition
NAME WARNES MORehend		1.2 NAM	E		
STREET ADDRESS 2531 NW 53	FC 32606	1.3 STRE	ET ADDRESS		
TITLE DOES OF T		1.4 CITY			
		21 TITLE	i	LJ C	hange 🔲 Addition 🛚
NAME WAYNES, Morehead STREET ADDRESS 3531 NW 53 M TECC		2.2 NAM			
CITY-ST-ZIP GAINESV. //E, FL 32606		2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP			
TITLE TO PELETE		3.1 TITLE		□ C	hange Addition
l		3.2 NAM	:		
STREET ADDRESS 2531 MANSIONS PKWY		3.3 STRE	ET ADDRESS		
TITLE	E, F & 32606	3.4. CITY			
NAME	☐ DELETE	4.1 TITLE 4.2 NAM		□ 0	hange Addition
STREET ADDRESS			ET ADORESS		
City-St-ZiP		4.4 CITY-			
TITLE	☐ DELETE	5.1 TITLE		□ C	hange Addition
NAME		5.2 NAME	:	_	
STREET ADDRESS		5.3 STREE	ET ADDRESS		
CITY-ST-ZIP		5.4 CITY			
TITLE	DELETE	6.1 TITLE	ľ		hange Addition
NAME		6.2 NAME			1
STREET ADDRESS		ł	ET ADDRESS		
City-St-ZiP		6.4 CITY-	ST-ZIP		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I em an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with application.